## **House of Representatives**



General Assembly

File No. 778

January Session, 2007

House Bill No. 7191

House of Representatives, May 7, 2007

The Committee on Appropriations reported through REP. MERRILL of the 54th Dist., Chairperson of the Committee on the part of the House, that the bill ought to pass.

# AN ACT CONCERNING REVISIONS TO THE STATE-WIDE RESPITE CARE PROGRAM.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- 1 Section 1. Section 17b-349e of the general statutes is repealed and
- 2 the following is substituted in lieu thereof (*Effective July 1, 2007*):
- 3 (a) As used in this section:
- 4 (1) "Respite care services" means support services which provide
- 5 short-term relief from the demands of ongoing care for an individual
- 6 with Alzheimer's disease.
- 7 (2) "Caretaker" means a person who has the responsibility for the
- 8 care of an individual with Alzheimer's disease or has assumed the
- 9 responsibility for such individual voluntarily, by contract or by order
- of a court of competent jurisdiction.
- 11 (3) "Copayment" means a payment made by or on behalf of an
- 12 individual with Alzheimer's disease for respite care services.

(4) "Individual with Alzheimer's disease" means an individual with Alzheimer's disease or related disorders.

- (b) The Commissioner of Social Services shall establish a demonstration program, within available appropriations, to provide respite care services for caretakers of individuals with Alzheimer's disease meet the requirements set forth in subsection (c) of this section. Such respite care services may include, but need not be limited to (1) homemaker services; (2) adult day care; (3) temporary care in a licensed medical facility; (4) home-health care; or (5) companion services. Such respite care services may be administered directly by the department, or through contracts for services with providers of such services, or by means of direct subsidy to caretakers of individuals with Alzheimer's disease to purchase such services.
- (c) (1) No individual with Alzheimer's disease may participate in the program if such individual (A) has an annual income of more than thirty thousand dollars or liquid assets of more than eighty thousand dollars, or (B) is [covered by Medicaid] receiving services under the Connecticut home-care program for the elderly.
  - (2) No individual with Alzheimer's disease who participates in the program may receive more than three thousand five hundred dollars for services under the program in any fiscal year or receive more than thirty days of out-of-home respite care services other than adult day care services under the program in any fiscal year.
  - (3) The commissioner may require an individual with Alzheimer's disease who participates in the program to pay a copayment for respite care services under the program, except the commissioner may waive such copayment upon demonstration of financial hardship by such individual.
- (d) The commissioner shall adopt regulations in accordance with the
  provisions of chapter 54 to implement the provisions of this section.
  Such regulations shall include, but need not be limited to (1) standards

45 for eligibility for respite care services; (2) the basis for priority in 46 receiving services; (3) qualifications and requirements of providers, 47 which shall include specialized training in Alzheimer's disease, dementia and related disorders; (4) a requirement that providers 48 49 accredited by the Joint Commission on the Accreditation of Healthcare 50 Organizations, when available, receive preference in contracting for 51 services; (5) provider reimbursement levels; (6) limits on services and 52 cost of services; and (7) a fee schedule for copayments.

(e) The Commissioner of Social Services may allocate any funds appropriated in excess of five hundred thousand dollars for the demonstration program among the five area agencies on aging according to need, as determined by said commissioner.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2007	17b-349e

**HS** Joint Favorable C/R APP

APP Joint Favorable

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The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either chamber thereof for any purpose:

### **OFA Fiscal Note**

State Impact: None

Municipal Impact: None

Explanation

This bill changes the eligibility pool for the Alzheimer's Respite program. As this program is not an entitlement and is operated within available resources, these changes have no fiscal impact.

The Out Years

State Impact: None

Municipal Impact: None

## OLR Bill Analysis HB 7191

# AN ACT CONCERNING REVISIONS TO THE STATE-WIDE RESPITE CARE PROGRAM.

### **SUMMARY:**

The State-wide Respite Care Program provides respite care for people with Alzheimer's disease or related disorders, regardless of age, who (1) have annual incomes up to \$30,000 and liquid assets up to \$80,000 and (2) are not covered by Medicaid.

This bill allows people under age 65 receiving community Medicaid, which does not provide respite care, to participate in the State-wide Respite Program. It does this by changing the people excluded from this program from those covered by Medicaid to those covered by the Connecticut Home Care Program for Elders (CHCPE). CHCPE is a Medicaid waiver and state-funded program that provides respite services, as well as other home and community based care, to people aged 65 and over who meet its eligibility requirements.

Respite care services are support services that provide short-term relief for family caregivers from the demands of continual care for an individual with Alzheimer's or related diseases.

EFFECTIVE DATE: July 1, 2007

#### COMMITTEE ACTION

**Human Services Committee** 

Joint Favorable Change of Reference Yea 17 Nay 0 (03/15/2007)

Appropriations Committee

Joint Favorable

Yea 47 Nay 0 (04/17/2007)